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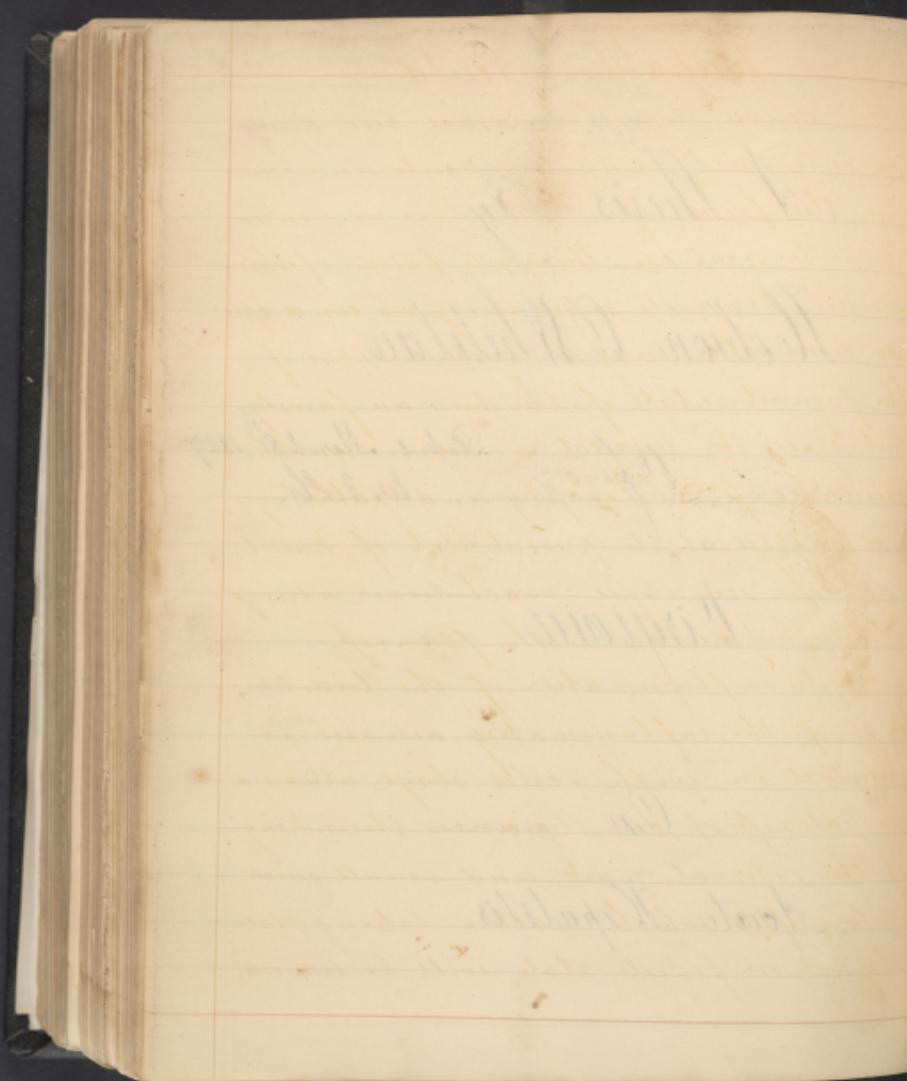
A Thesis By
Hobson O'Whitlaw

of Pap'd March 8th 1827
W. & G. Co.

Virginia

On

Acute Hepatitis



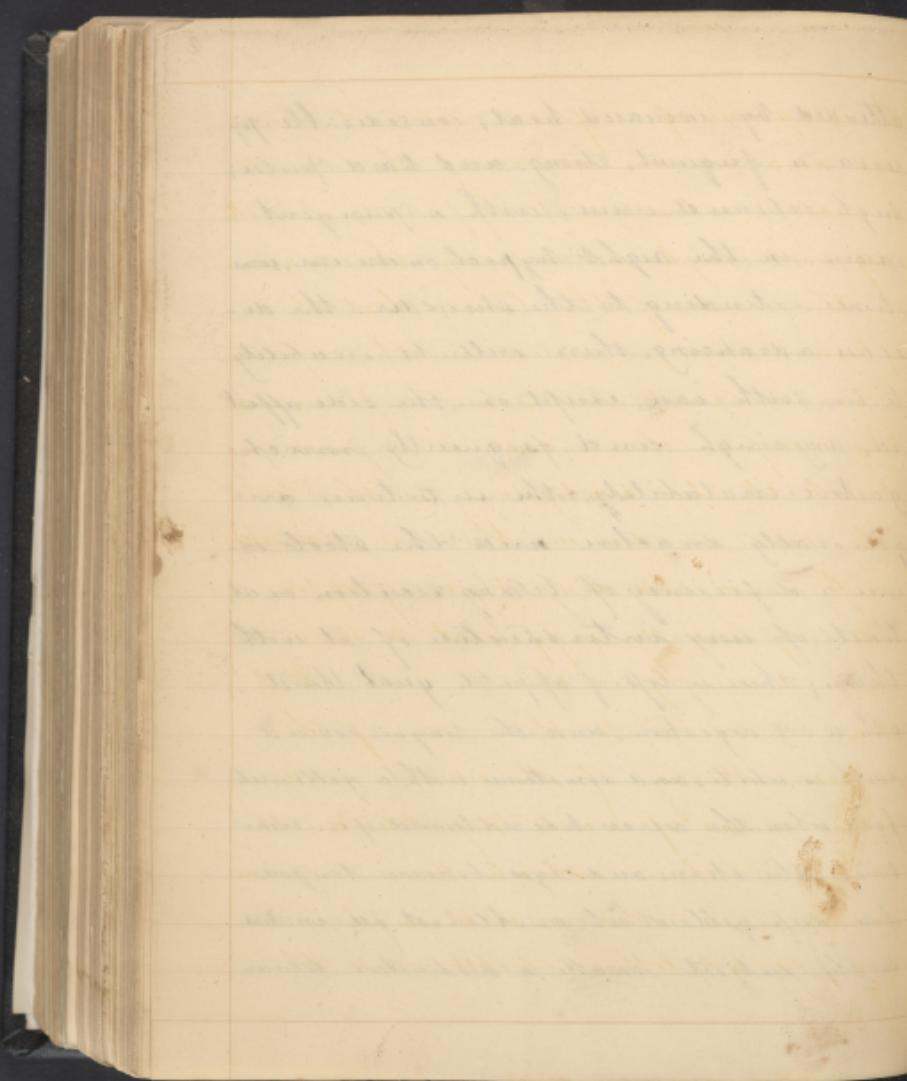
Hepatitis. Acuta.

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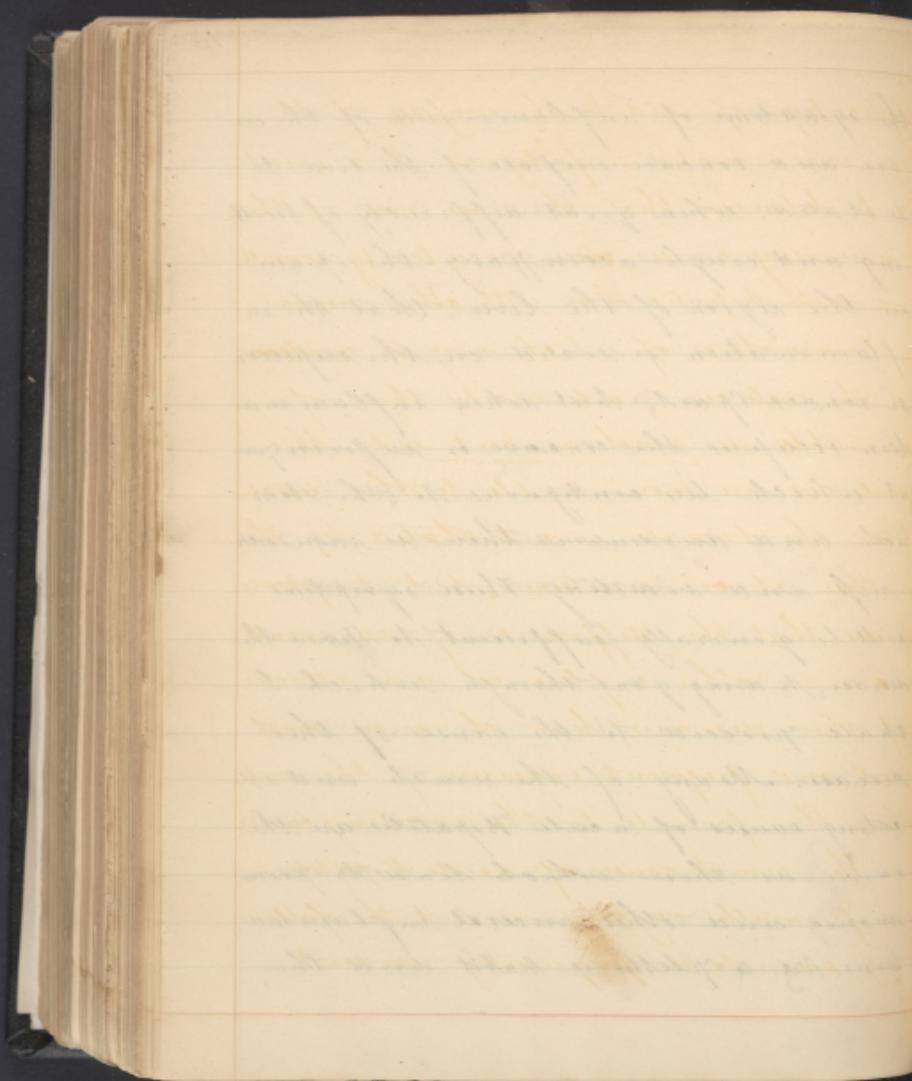
This disease has long since been divided into two forms: viz. acute and chronic, the former of which it is my intention to treat on. The acute form of this disease, from its rapid progress and speedy termination, may be considered as one of the frequent outlets of the human family; but since the medical world under the guidance of Philosophy and Pathology has arrived at its present state of knowledge, the scientific practitioner always meets this disease with firmness.

Acute inflammation of the liver like most of the inflammatory diseases is ushered in with a cold stage, attended by pallor of countenance shrinking of the external parts and small quick pulse; after which reaction taking place the hot or febrile state will be induced;

attended by, increased heat, considerable oppression, a frequent, strong, and hard pulse, high coloured urine, with a prenient pain, in the right hypochondrium, sometimes extending to the shoulder: the disease advancing, there will be inability to lie with ease, except on the side affected, dry cough and frequently much gastric irritability; the intestines are generally inactive and the stools indicate a deficiency of biliary secretion or at least of any intermixture of it with them, there is loss of appetite, great thirst with a hot dry skin, and the tongue covered with a white, and sometimes with a yellowish fur; when the disease has continued for some time, the skin and eyes become tinged of a deep yellow colour. Almost all writers on the subject make a distinction between



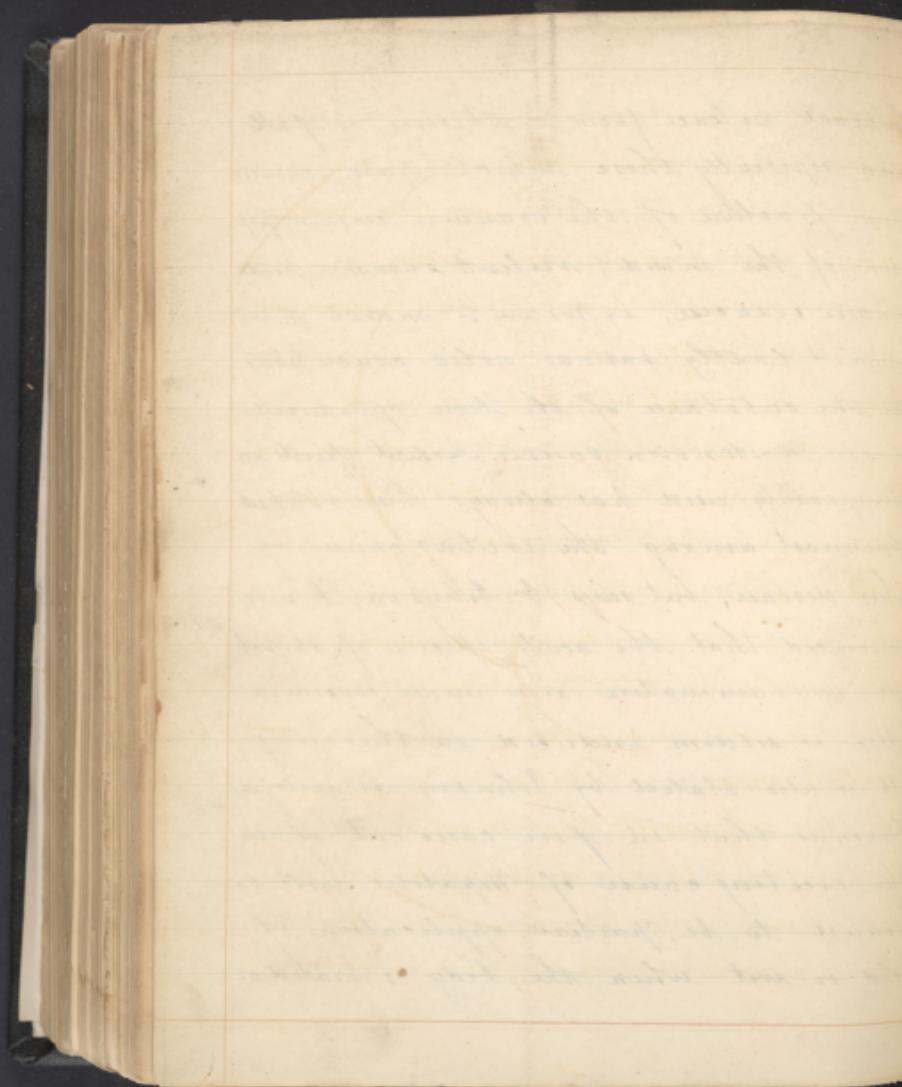
the symptoms of inflammation of the convex and concave surface of the liver. It is stated, when great difficulty of breathing and cough accompany the pain in the region of the liver, that the inflammation is seated in the superior or convex part; but when inflammation occupies the concave or inferior part which lies contiguous to the stomach and duodenum there is now sickness and vomiting. These symptoms will be generally sufficient to know the disease, having gone through which I shall proceed to the causes of this disease. As any of the remote and exciting causes of acute Hepatitis are the same as those which lead to pneumonia and other visceral inflammations. Niz. a plethoric habit and the



application of cold to the surface of the body when heated or fatigued. It is said by Dr. Tolencor that there are some of the predisposing causes more peculiarly connected with hepatic than with other visceral inflammations, of which may be mentioned the male sex, particularly those of irritable dispositions; but why the male sex are more liable to this disease than the female is not stated by the author above mentioned; but it appears to me that the difference of sex would have no other influence over attacks of this disease, than the more constant and frequent exposure of the male than the female to the exciting causes.

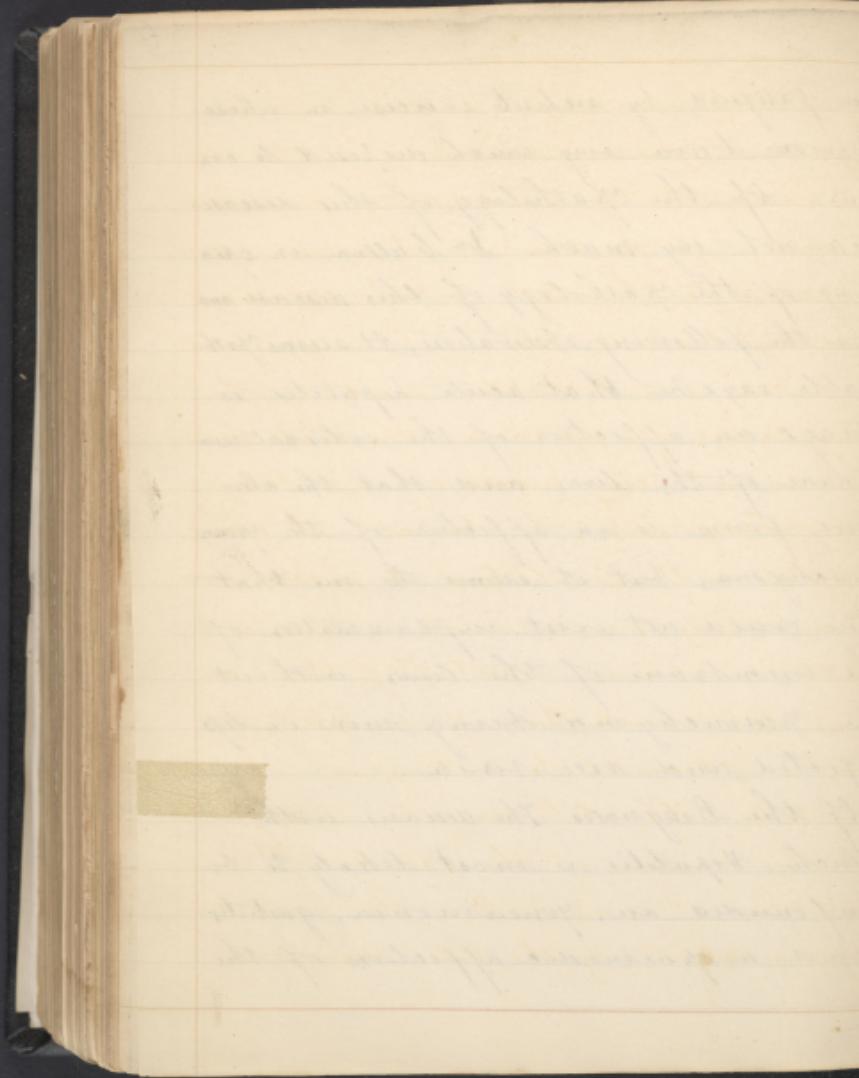
The remote causes of acute Hepatitis are frequently very obscure; but the following seem to be frequently evident.

External violence from contusions or falls
and especially those which have occasion
a fracture of the cranium, certain pos-
sions of the mind, violent summer heats,
undue exercise, exposure to marsh mias-
ma & lastly various solid concretions
in the substance of the liver produced
from unknown causes. Ardent spirits in
temperately used has always been ranked
fourmost among the exciting causes of
this disease, but says Dr Johnson, I am
informed that the acute species of Hepat-
itis inflammation now under considera-
tion is seldom induced in this way.
It is also stated by Johnson as well as
Thomas that in five cases out of six
the exciting cause of Hepatitis will be
found to be, practical application of
cold or wet when the body is heated or



or fatigued by violent exercise, in whose opinions I am very much disposed to concur. Of the pathology of this disease I cannot say much. Dr. Cullen in speaking of the pathology of this disease makes the following observations. It seems probable says he that acute hepatitis is always an affection of the external membrane of the liver and that the chronic form is an affection of the parenchyma; but it seems to me that there could not exist inflammation of the membrane of the liver without the parenchyma being more or less affected and vice versa.

Of the Diagnosis. The diseases with which Hepatitis is most likely to be confounded are, pneumonia, gastritis, and a spasmodic affection of the



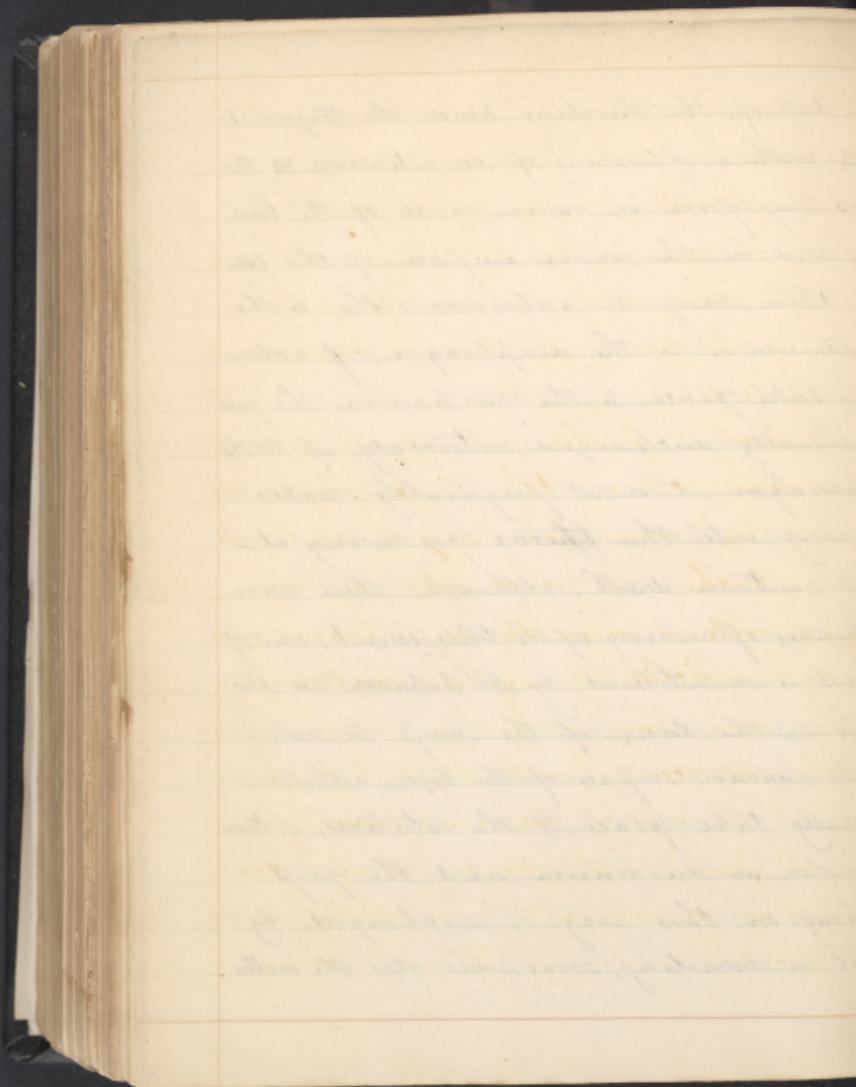
gall ducts. We shall be able to distinguish it from Pneumonia by the pain extending to the shoulder in Hepatitis whereas in Pneumonia it is more confined to the chest, by the sallowness of countenance, the cough being unattended by expectoration and by the less degree of dyspnoea. The heat and pain not being increased from taking anything into the stomach, its being able to retain whatever liquids or medicines are received into it, without the immediate rejection of them and the less prostration of strength, will be sufficient to distinguish it from gastritis. Hepatitis may be distinguished from spasm of the gall ducts, ^{1st} by the absence of nausea, ^{2d} by the pain being permanent, ^{3d} by the pulse being very

frequent and by the patient always preferring to keep the body in a straight position; whereas the patient will obtain the greatest ease, when there is spasm of the gale ducts, by bending the body forward.

Of the prognosis. The most favourable symptoms in Hepatitis, are, a gradual subsidence of the febrile symptoms, an improvement in the complexion, the strength not much reduced, return of appetite &c. whereas, intensity of pain, full and frequent pulse, heat, dry skin, constipation, thirst, and frequent rigours, denote approaching or existing suppuration. Hepatitis like most visceral inflammations may terminate, in resolution, suppuration sinus or gangrene. Its most frequent

termination, at least in this climate, is by resolution, which is frequently attended, by discharges or evacuations of different kinds, supposed by many writers to be critical, such as hemorrhages from the nose or hemorrhoidal vesels, sweating, diarrhoea, depositions of sediment in the urine and sometimes a woous effusion in the cavity of the abdomen showing itself under the form of water. The most frequent of the unfavourable terminations of Hepatitis is in suppuration, the symptoms of a tendency to which, I have stated above, but when suppuration has already taken place, the fever becomes somewhat intermittent, frequent rigours & shiverings are felt, the sense of sight in the last increases, the pain is less

ate, but of the throbbing kind, the tongue is
bitten with a flushing of countenance &c. The
abscess may form on various parts of the liver
& seated on the convex surface of the liver,
there may be adhesions either to the
peritoneum or to the diaphragm; if adhe-
sions take place to the peritoneum the pus
is generally discharged outwardly, if to the
diaphragm it most frequently makes
its way into the thorax producing al-
most certain death, although there have
instances of recovery after this event, one of
such is mentioned by Dr. Johnson in his
work on the liver; if the abscess be seated
on the concave surface of the liver, adhesions
generally take place to the intestines, either
the colon or duodenum and the pus
rising in this way is discharged by
stool or vomiting, sometimes also the matter



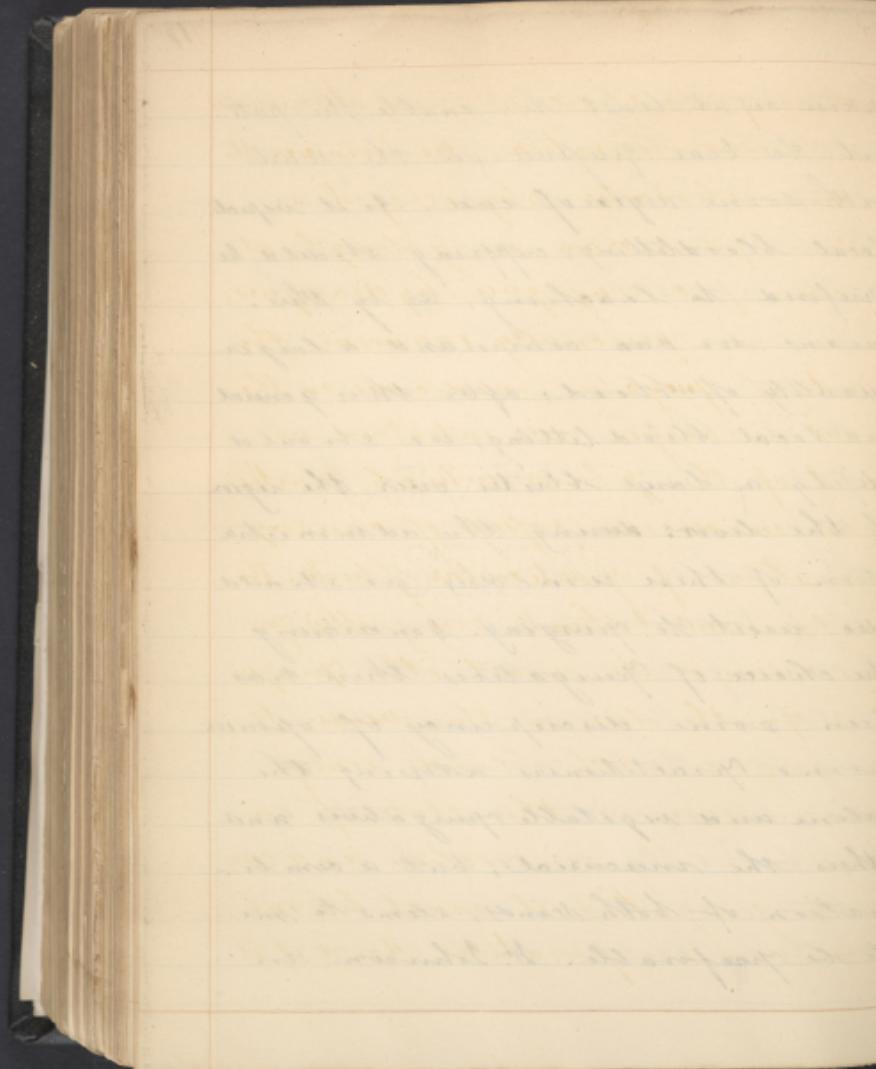
is discharged into the intestines by the biliary ducts. of the other terminations of Hepatitis I shall, not say any thing as the one is so rare as hardly to be met with and the other may be more properly referred to the head of chronic arrangements of the liver.

Dissections of those who have died of this disease show the liver, frequently to be very much enlarged and hard to the touch; its colour also is very much altered and the membranes over a less affected by inflammation. Siphuncles also show adhesions of this organ to the adjacent parts, that tubercles as well as hydatids are sometimes found in it and that large abscesses containing a considerable quantity of matter are often found in its substance.

Giliary calculi are now and then found, and it is stated by authors that the liver is sometimes found in a putrid state, resembling very much in appearance a honeycomb, but it appears that tubercles are amongst the most frequent appearances on dissection, the various kinds of which enumerated by Parr Bailey and others, I shall not enter into a detail off.

Of the treatment, The treatment of acute Hepatitis should always be commenced by copious bleeding both topical and general, purging blisters low diet and every antiphlogistic mean should be strictly enforced. In the begining of our treatment we should always carry resection far enough to relieve the

pain or at least to enable the patient to bear pressure on the part with some degree of ease. As it respects local bloodletting, cupping should be preferred to leaching, as by this means we can command a larger quantity of blood; after this general and local bloodletting, we should apply a large blister over the region of the liver; during the administration of these remedies we should also resort to purging. Concerning the choice of purgatives there has been some discrepancy of opinion some practitioners advising the saline and vegetable purgatives and thus the mercurial, but a combination of both kinds, seems to me to be preferable. Dr. Johnson in



quaking of the choice of young at any makes
the following observation. For however the
modern scholastic physiologist or
routine physician may laugh at
the idea, of cholagogues hydragogues
&c. he who personally examines the
effects of purgative medicines on the
faecal discharges, will entertain no
doubt of the power which particular
medicines possess of causing
evacuations of particular fluids. He
therefore (and I think very justly) pre-
fers calomel to most other purga-
tives; for the liver in this disease be-
ing gorged with blood, unless
we can remove this state of an-
gorgement by resection and sui-
table purgation, it must termi-
nate in suppuration. And it is

well known that none of neutral salts or indeed any common purgative have any or very little effect in causing either a discharge of blood from an engorged liver or to relieve the biliary ducts of their contents; whereas calomel independent of its purgative properties has such an effect to a very great degree; therefore I think the mercurial purgatives should always be preferred, although their action may be very much assisted by any of the neutral salts or senna thus, after having given a dose of calomel we should follow it with a dose of either the epsom or glauber salt and senna, which should be repeated from time to time pro re nata. The stomach and

feels are sometimes very irritable; to relieve which we should give cal-
mnel in two or three grain doses
combined with a fourth of a
grain of opium, if these means
succeed in calming the irritability of
the stomach and producing gentle
diaphoresis, we may suppose every
thing in a favourable condition;
but if the surface of the body
should remain constricted and
my notwithstanding these remedies,
we should administer (if the stom-
ach will bear it) a grain of pulvis
Antimonialis with each dose of
calsmnel; these remedies should be con-
tinued untill a brassy taste of
the mouth is observed or a mer-
curial foctor of the breath or a

acute Hepatitis, viz. its termination in suppuration; the other terminations of this disease I shall say any thing of, as the one is not to be cured by any remedy and the other may be more properly referred to the chronic form of this disease.

When Hepatitis has not been treated by suitable remedies or has not been attended to in time, it almost always terminates in suppuration, which if we find unavoidable from our not having seen the patient in time, we should endeavor to promote, to effect which we should give Peruvian bark in drachm doses every two or three hours during the day, using at the same time a nutritive diet

and would be of the best
advantage with it, and as
you are under a certain rule
of course the time is all in
your hands and you are
all a proper disposal
and with the money raised
out and the old damaged and
old equipment all out of
service is it really and t
he price is reasonable, and
the day is up to date with
good time and money to be
spent, and as twisted with
opportunities to increase in
accordance with the time
and you may make a
good job of it, and word will
get out when a and more all

with a moderate quantity of wine
which course should be continued
until suppuration is completed, after
this we should apply a large emol-
lient poultice over the region of the
liver, to produce a discharge of
matter externally; which should be
effected as soon as fluctuation
and a pointing of the abscess can
be discovered, by an open made exter-
nally down to the abscess: if this can
not be effected and it ^{sharply} break inter-
nally all we can do is to support the
system by tonics a generous diet &c.
of the diet in this disease; it should
be strictly antiphlogistic; allowing the
patient sago tapioca rice &c.

spongy hardness of the gums; after which the medicine should be discontinued or at least given very seldom so as to prevent pyrexia which I think is not necessary in the treatment of acute Hepatitis, although any alternative course in my opinion is almost always necessary; for admitting that inflammation of the liver may be subdued by antiphlogistic means, which certainly is the case, yet there always remains more or less of functional derangement of this organ which nothing can so completely eradicate as an alternative course of mercury. There are some practitioners and particularly those of the tropical climates who advise the

use of mercury in the commencement of the disease in such a manner as to produce its specific effects on the system; but this practice will (I think) always prove unavailing, for admitting that such an effect would take place when the system is under considerable excitement from inflammation - (which I think is very doubtful) it would only be adding oil to fire, and increasing the already irritable state of the system; therefore I think mercury should never be used in this way, to cure acute Hepatitis.

Thus have I noticed most of the remedies employed in this disease and I have only now to notice the treatment of one of the terminations of

